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**** CONTINUING DATA *******
 This application is a CIP of 10/154,512 05/24/2002 PAT 7,118,559

**** FOREIGN APPLICATIONS *******

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
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Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	STATE OR COUNTRY MA	SHEETS DRAWING 14	TOTAL CLAIMS 24	INDEPENDENT CLAIMS 3
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TITLE
 Body fluid collection apparatus

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